

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>	HL	59	0-16-01
<b>O.I.P.E. CLASSIFIER</b>			3/5/1
<b>FORMALITY REVIEW</b>	EP	706	3-19-01
<b>RESPONSE FORMALITY REVIEW</b>	M.H	625	05-07-01

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	
Original	
6	12/15/1
7	12/15/1
8	12/15/1
9	12/15/1
10	12/15/1
11	12/15/1
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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